## **Retail Food Inspection Report**

Floyd County Health Department Telephone (812) 948-4726

Establishment Name CREEKSIDE OUTPOST  Address 614 HAUSFELDT LANE, NEW ALBANY IN 47150  Owner	E. O	Telephone Number  st 812-948-9118  wn 502-262-0387  Purpose	Date of Inspection 09/15/2020 Follow Up	ID#
PHIL B. YOUNG		X Routine	ronow op	09/25/2020
Owner's Address 614 HAUSFELDT LANE NEW ALBANY, IN 47150-		Follow-up Complaint		
Person in Charge MICHELLE WILLIAMS		Pre-Operational		
Responsible Person's Email CREEKSIDEOUTPOST2FEATHERS@GMAIL.COM		Temporary HACCP	Menu Type  1 X 2 3 4 5 _	
Certified Food Handler		Other (list)		
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"				
Section # C NC R Narrative			To Be Co	orrected
Section # C NC R Narrative To Be Corrected  411 X Observed lights to be out in BOH dry storage area. 1 WEEK 430 X Observed multiple areas where roof has been leaking, including stained ceiling tiles in BOH dry storage and moldy over kitchen hood.				
Summary of Violations C 0 NC 2 R 0				
Received by (name and title printed): MICHELLE WILLIAMS		Inspected by (name and title printed):  A.J. Ingram CHIEF FOOD SPECIALIST		
Received by (signature):		Inspected by (signature):		
cc: cc:			cc:	